ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION** INITIALS ים אס. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** MO RESPONSE FORMALITY REVIEW **INDEX OF CLAIMS** Rejected Non-elected Allowed Interference (Through numeral)... Canceled Restricted O Objected Claim Date Claim Date Original Final Original Final 9 (If more than 150 claims or 10 actions staple additional sheet here BEST AVAILABLE COPY

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